# State of California Department of Alcohol and Drug Programs

#### Prevention Activities Data System (PADS) Reporting Year July 1, 2003 – June 30, 2004

PROGRAM DESCRIPTION - ADP7235A

SECTION A County/Provider Information			
1. Date: 6.	Provider Address:	10. Type of Contract:	
2. County Name:	City/State/Zip:	County Operated	
3. Provider Name: 7.	Telephone No.:	() Out-of-County Contract	
4. Provider ID No.: 8.	Fax No.:	()	
5. Contact Person: 9.	E-mail Address:		
SECTION B Program Information			
1. Program Status Please check the appropriate box.   New Program - Start Date		☐ Existing Program	
2. Program Description Please provide a brief description of the program.		3. ADP Negotiated Net Amount Contract Prevention Business Practices:	
		Please check all the boxes that apply.  (a) <u>Assessment of Needs with Data:</u> Do you, through the use of data relevant to specific communities, identify at risk and under-served populations and their environmental risks related to alcohol and other drugs?	Yes No
		(b) <u>Prioritize &amp; Commit to Purpose:</u> . Do you, through local or regional advisory bodies (coalitions), establish prevention priorities for the assessed needs; provide a sound validation for the selection of priorities and identify the benefits; and provide evidence that identified	
		priorities and desired outcomes are culturally relevant to priority populations?  (c) <u>Determine Outcome Objectives &amp; Measurements</u> . Do you establish the desired goal/outcome, objectives, and actions using well-defined terms; determine the "who, what, where, when and how" that will attain these; and specify how prevention actions will be	
		measured to monitor interim and final results?  (d) Proven Prevention Strategies: Do you select prevention activities/services based on identified theories or practices supported by evaluation/research evidence that substantiates these actions are, or promise to be, effective for attaining the desired outcome and select or adapt actions to assure they are culturally relevant to the intended populations and communities?	
		(e) Evaluate Measured Results & Improve: Do you use goal and objective measurements to assess steps toward achieving the desired outcome as well as the final results and apply this data to continuously refine, strengthen, and sustain the prevention effects?	
4. Accessibility Please check all the boxes that apply to the program services accessible to persons who may have disabilities		<ol> <li>Strategies Delivered         Please check all boxes that apply to the strategy forms that will be completed and included in this package.     </li> </ol>	
(a) Hearing		(1) Information Dissemination (ADP 7235B)	
☐ (b) Mobility		(2) Education (ADP 7235C)	
(c) Vision		(3) Alternatives (ADP 7235D)	
(d) Speech		(4) Problem Identification & Referral (ADP 7235E)	
(e) Mental		(5) Community-Based Process (ADP 7235F)	
(f) Developmental		(6) Environmental (ADP 7235G)	
(g) Other (specify)			

Reporting Period Dates: 7/1/03 through 6/30/04

DISSEMINATION STRATEGY -	A DD 700FI
111//EN/11/10 11/10/ / 18/016/-A	- ALIP //KNI

SECTION A Provider/Program Information  1. County Name:		der Name:			5. T	elephone No.: (	)					
2. Provider ID No.:	4. Contac	act Person:										
Please check all boxes that apply. Asterisks* denote high-risk categories.   (i) Fire Prof. Gangs  (ii) Gangs  (iii) Gangs  (iv) Children of Substance Abusers* (iv) General  (iv) Civic Groups/Coalitions (iv) Governm  (iv) College Students (iv) Health P  (iv) Delinquent/Violent Youth* (iv) High Schape (iv) Economically Disadvantaged*	e Groups/Unions essionals  Population ent/Elected Officials rofessionals  Col Students ted Persons  E Groups/Unions E Colored	□ (p) Homeowners Associa □ (q) IV Drug Users □ (r) Law Enforcement/Mili □ (s) Lesbian/Gay/Bisexual □ (t) Local Municipal Agence □ (u) Middle/Jr High School □ (v) Neighborhood Associa □ (w) Older Adults □ (x) Parents/Families ription for each activity; for each service	litary al/Transgender ncies ol Students ciations	□ (z) Pr (aa) Pr (bb) Pr (cc) Pr (dd) Pr (ee) Pr (ff) Pr (gg) R	reople With Mental Hersons Using Subst dersons With Physical drysical/Emotional Al dregnant Women/Tee dreschool Students drevention/Treatment drofessional/Trade As deligious Groups	ances* al Disabilities* buse Victims* ens* t Professionals ssociations	☐ (nn) ☐ (oo) ☐ (pp)	Retailers Runaway/Hi School Drop Social Servi Teachers/A Voluntary/Fi Women and Youth/Minor Other (specify	oouts* ice Provid dministra raternal C I Children 'S	ders tors/Coun Communit <u>y</u>	y Service	
"Number Served	column. These entries must be nu	umeric. Enter A or E in the "Actual/Es	Estimated" column. For (	C2, C3 and C4, ent	ter in the demographic br	eakdown; the "Totals":	should match the "N	lumber Served."			Serveu III	
C2 R	ace/Ethnicity	1 1 1 1		C3 Age	1	1	1 1		C4 Gen	der	1	
C1 Services Requiring Demographics Frequency F	(b) Asian or Pacific Island. (c) Hispanic/ Latino (d) Native Am/ Alaska Native	(e) African American (f) Multiracial/ Multiethnic (g) Other	Specify "Other"	(a) Under 5 (b) 5 – 9	(c) 10 – 12 (d) 13 – 15	(e) 16 – 18 (f) 19 – 25	(g) 26 – 55 (h) Over 55	<u>Total</u>	(a) Male	(b) Female	(c) Other	<u>Total</u>
(a) Brochures/Pamphlets Disseminated												
(b) Conferences/Fairs												
(c) Health Fairs/Promotions												
(d) Newsletters												
Disseminated (e) Resource Directories												
Disseminated (f) Speaking												
Engagements (g) Other (specify)												
C5 Services Not Requiring Demographics Frequency		Fred	equency	SECTION D	Where Services O	ccurred						
(h) A/V Materials Developed - Original	(p) Newsletters Developed – O	Original		Please check all t	that apply.	☐ (g) Hea	Ith Center/Clinic		(n) Tran	nsitional Hou	using	
(i) A/V Materials Disseminated	(q) Printed Materials Developed	ed (other than above)		☐ (a) Alterna	ative Schools	☐ (h) Hos	pital		(o) Trea	ntment Facili	ity	
(j) Brochures/Pamphlets Developed	(r) Printed Materials Dissemina	nated		☐ (b) Comm	nunity At large	☐ (i) Park	ks/Recreation		(p) Univ	ersity/Colle	ege	
(k) Clearinghouse/Info Resource Centers in Operation	(s) Public Service Announceme	nents Developed - Original		☐ (c) Comm	nunity Center	☐ (j) Publ	lic Housing		(q) Wor	k Place		
(I) Curricula Developed – Original	t) Public Service Announcement	nents Aired		☐ (d) County	y/Provider Office	☐ (k) Resi	idential Treatment		(r) You	th Clubs/Ce	enter	
(m) Curricula Disseminated	(u) Resource Directories Develo	loped – Original		☐ (e) Crimina	al Justice System	☐ (I) Sch	ool		(s) Othe	er (specify)		
(n) Media Campaigns Developed	(v) Telephone Information Serv	vice Calls		☐ (f) Faith C	Center	☐ (m) Stre	et Outreach					
(o) Media Campaigns Conducted  ADP 7235B – INFORMATION DISSEMINATION STRATEGY (Revised 3/03) Departmental Use – SERVICE CO	(w) Web Sites in Operation											

Reporting Period Dates: 7/1/03 through 6/30/04

EDUCATION STRATEGY – ADP 7235C

1. County Name: 2. Provider ID No.:	/Program Inf 	formation 					<ol> <li>Provid</li> <li>Contact</li> </ol>	er Name: ct Person	:						5. 	Telepho	one No.: (	)							
SECTION B Service F Please check all boxes that ap high-risk categories.  (a) Business and Ir (b) Children of Sub (c) Civic Groups/Ci (d) College Student (e) Delinquent/Viol (f) Economically D	Populations uply. Asterisks* Industry Industry Instance Abuse Industry Indu	denote	1 (g) E 1 (h) E 1 (i) Fi 1 (j) G 1 (k) G 1 (m) H 1 (n) H	lementary mployee ire Profes sangs seneral Po sovernment lealth Prof igh School IV Infecte	y School S Groups/Ussionals opulation nt/Elected fessionals of Studen ed Person	Jnions d Official s ts is	s	(q) IV (r) La (s) Le (t) Lo (u) Mi (v) Ne (w) Oli (x) Pa	omeowner Drug Use w Enforce sbian/Ga cal Munic ddle/Jr Hi eighborho der Adults rents/Far	ers ement/Mi y/Bisexua ipal Ager gh Schoo od Assoc nilies	litary al/Transg ncies ol Studen iations	ıts	(y   (z   (z   (z   (c   (c   (c   (f   (g	z) Pe aa) Pe bb) Ph cc) Pr dd) Pr ee) Pr f) Pr gg) Re	eople With ersons Us ersons With nysical/Em egnant W reschool S revention/ ofessiona	ing Subs th Physic notional A comen/Te tudents Treatmer I/Trade A roups	tances* al Disabili Abuse Vict ens* at Profess association	ties* tims* ionals		(ii) F (kk) S (kk) T (mm) V (nn) V (pp) C	oluntary/l Vomen an outh/Mino Other (spec	ppouts* vice Prov Administr Fraternal d Childre ors ify)	riders ators/Cou Communi en	ity Service	
SECTION C Service I	Delivered		"Numbe	ne the singli r_Served" co	e most app olumn. The	ropriate se ese entries	rvice descrip must be nun	tion for eac neric. Enter	n activity; to A or E in the	r eacn serv ne "Actual/E	rice delivere Estimated" o	ea, compiete column. For	C2, C3 an	d C4, ente	er the numbe er in the dem	er of times nographic b	tne service v reakdown; t	vas provide he "Totals" s	a in the "Fr should mate	equency" o ch the "Nur	n ber Served	er the numb !."	er of person	s servea in	tne
C1 Services Requiring Demographics	Frequency	Number Served	A = Actual E = Estimated	(a) White, Not Hispanic	(b) Asian or Pacific Island.	c) Hispanic/ Latino	(d) Native Am/ Alaska Native	(e) African American	(f) Multiracial/ Multiethnic	(g) Other	Specify "Other"	<u>Total</u>	C3 Ag	e 6 - 2 (q)	(c) 10 – 12	(d) 13 – 15	(e) 16 – 18	(f) 19 – 25	(g) 26 – 55	(h) Over 55	<u>Total</u>	C4 Ge	(b) Female	(c) Other	<u>Total</u>
(a) Children of Substance Abusers Groups																									
(b) Classroom Education Services																									
(c) Educational Services for Youth Groups																									
(d) Friday Night Live (FNL)/Club Live/FNL Kids (e) Mentoring																									
(f) Parenting/Family Management Services																									
(g) Peer Leader/Helper Program (h) Preschool ATOD Prevention Programs																									
(i) Small Group Sessions																									
(j) Theatrical Troupes																									
(k) Other (specify)																									
SECTION D Where Services Occurr Please check all that apply.	red	☐ (b) Comr	native Schoo munity At La munity Cente	arge er	,	(e) (f) (g) (h)	Criminal Ju Faith Cent Health Ce Hospital	er	m		(i)	Parks/Red Public Ho Residenti School		nt	<u>'</u>	(m) (n) (o) (p)	Street Ou Transition Treatmen University	al Housing t Facility			(q) (r) (s)	Work Pla Youth Cl Other (sp	ubs/Center		
ADP 7235C - EDUCATION STRATEGY			,												<del></del> -	4 /		<u> </u>							

Reporting Period Dates: 7/1/03 through 6/30/04

VITEDNIV	TIVES ST	DATECY	- ADP 7235F
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SECTION A Provider/I  1. County Name:	Program Inf	ormation					3. Provid	er Name:							5.	Telepho	ne No.: (_	)							
<ol> <li>County Name:</li> <li>Provider ID No.:</li> </ol>						4	1. Conta	ct Person	:							•	,	•							
SECTION B Service P Please check all boxes that app high-risk categories.  (a) Business and In (b) Children of Subs (c) Civic Groups/Co (d) College Students (e) Delinquent/Viole (f) Economically Di	copulations bly. Asterisks* d dustry stance Abuse palitions s ent Youth*	lenote	(g) E (h) E (i) F (j) G (k) G (l (k) G (l (m) H (n) H	lementary mployee ire Profes angs eneral Po overnment ealth Prof igh School IV Infecte	Control School S	Students Inions d Officials s s		(q) IV (r) La (s) Le (t) Lo (u) Mi (v) Ne (w) Old (x) Pa	omeowner Drug Use w Enforce sbian/Gay cal Munic ddle/Jr Hi sighborhoo der Adults rents/Fan	ers ement/Mil y/Bisexua ipal Ager gh Schoo od Assoc nillies	itary I/Transg ncies ol Studen iations	nts	(y	e) Pe ha) Pe ha) Pe hb) Ph cc) Pre hd) Pre he) Pre hg) Re	rsons Usi rsons Wit ysical/Em egnant W eschool S evention/T ofessiona ligious Gr	ng Subsing Physicotional Acomen/Testudentsing/Trade Acoups	al Disabilit buse Vict ens* t Professi sssociation	ies* ms* onals s		ii) R jj) S kk) S ll) T mm) V nn) W oo) Y pp) O	etailers unaway/F chool Dro ocial Serv eachers/F oluntary/F /omen and outh/Mino ther (speci	pouts* vice Prov Administra Fraternal d Childre ors	iders ators/Cou Communi n	ty Servio	
SECTION C Service D	elivered		Determir "Number	ne the singler r Served" co	e most appi	ropriate sen	ice descrip	tion for eac	h activity; fo	r each serv	ice delivere	ed, complete column. For	e the entire	row. Ente	r the number	er of times	the service v	as provide	d in the "Fre	equency" co	olumn'; ente	r the numb	er of person	s served ir	the
			Number		e/Ethnic		iust be riui	TICHC. LINC	AOLIII	ic Actual/E	Surialca	column. To	C3 Aq		i iii tiic ucii	iograpriic t	rcakdown, t	ic rotals	SHOULD THAT	CIT LITE TWOIT	ibei Serveu	C4 Ge	nder		
C1 Services Requiring Demographics	Frequency	Number Served	A = Actual E = Estimated	(a) White, Not Hispanic	(b) Asian or Pacific Island.	(c) Hispanic/ Latino	(d) Native Am/ Alaska Native	(e) African American	(f) Multiracial/ Multiethnic	(g) Other	Specify "Other"	<u>Total</u>	(a) Under 5	6 – 5 (d)	(c) 10 – 12	(d) 13 – 15	(e) 16 – 18	(f) 19 – 25	(g) 26 – 55	(h) Over 55	<u>Total</u>	(a) Male	(b) Female	(c) Other	<u>Total</u>
(a) ATOD-Free Social/ Recreational Events																									
(b) Community Drop-In Centers Operating		N/A																							
(c) Community Drop-In Center Activities																									
(d) Community Service Activities																									
(e) Friday Night Live (FNL) Club Live/FNL Kids (f) Outward Bound																									
(g) Recreational Activities																									
(h) Youth/Adult Leadership Activities (Includes Mentoring) (i) Other (specify)																									
			•	_	•	•		•		LI CONTRACTOR OF THE PROPERTY		•			•		•	LI CONTRACTOR OF THE PROPERTY			•		'		
SECTION D Where Services Occurr	ed	☐ (b) Comm	native Schoo munity At La	rge		□ (f)	Faith Cent		m		☐ (i) ☐ (j) ☐	Parks/Red	using			□ (m) □ (n)	Street Ou Transition	al Housing			☐ (q) ☐ (r)		ubs/Center		
Please check all that apply.	J		munity Cente ty/Provider (			107	Health Ce Hospital	nter/Clinic			□ (k) □ (l)	Residentia School	al Treatmer	nt		□ (o) □ (p)	Treatment University	,		<u>.</u>	□ (s)	Other (sp	ecify)		

Reporting Period Dates: 7/1/03 through 6/30/04

PROBLEM IDENTIFICATION AND REFERRAL STRATEGY - ADP 7235E

SECTION A Provider/Pro 1. County Name: 2. Provider ID No.:	ogram Info	ormation					3. Provid 4. Contac	er Name ct Person	:						5.	Telepho	one No.: (	)							
SECTION B Service Pop Please check all boxes that apply. high-risk categories.  (a) Business and Indu (b) Children of Substa (c) Civic Groups/Coali (d) College Students (e) Delinquent/Violent (f) Economically Disa	Asterisks* de stry stry sitions  Youth*	enote	(g)	lementary mployee of ire Profes angs eneral Poo overnment ealth Prof igh School IV Infecte	y School S Groups/U ssionals opulation nt/Elected fessionals of Student and Person	Students Inions I Officials S S		(q) IV (r) La (s) Le (t) Lo (u) Mi (v) Ne (w) OI (x) Pa	Drug Use w Enforce sbian/Gay cal Munic ddle/Jr Hi eighborhod der Adults irents/Fan	ement/Mili y/Bisexua ipal Agen gh Schoo od Associ milies	itary I/Transg Icies Il Studer Iations	ıts		z) F aa) F bb) F cc) F dd) F eee) F f) F	People With Persons Us Persons Wi Physical/En Pregnant W Preschool S Prevention/ Professiona Religious G	ing Subs th Physic notional A omen/Te Students Treatmer I/Trade A roups	tances* al Disabili abuse Vict ens* at Profess association	ties* ims* ionals		(ii) [ (jj) (kk) (ll) (mm) (nn) (oo) (pp) (	Retailers Runaway/I School Dro Social Ser Teachers// Voluntary/I Women an Youth/Mino Other (spec	opouts* vice Prov Administr Fraternal d Childre ors ify)	riders ators/Cor Commur	ity Servio	
SECTION C Service Deli	ivered		Determir "Number	ne the single r Served" co	e most approlumn. The	opriate ser se entries r	vice descrip nust be num	tion for eac neric. Enter	ch activity; fo A or E in th	or each servi ne "Actual/Es	ice deliver stimated" (	ed, complete column. For	e the entire C2, C3 an	row. Er d C4, en	nter the numb Iter in the den	er of times nographic b	the service v reak down; t	was provide he "Totals"	ed in the "Fr should mat	requency" ( tch the "Nu	column'; ente ımber Servec	er the numb I."	er of perso	ns served ir	the
				C2 Rac	e/Ethnic	ity	1	1	1			1	C3 Ag	je	1	1	1			1	1	C4 Ge	nder	1	1
C1 Services Requiring Demographics	Frequency	Number Served	A = Actual E = Estimated	(a) White, Not Hispanic	(b) Asian or Pacific Island.	(c) Hispanic/ Latino	(d) Native Am/ Alaska Native	(e) African American	(f) Multiracial/ Multiethnic	(g) Other	Specify "Other"	<u>Total</u>	(a) Under 5	(b) 5 – 9	(c) 10 – 12	(d) 13 – 15	(e) 16 – 18	(f) 19 – 25	(g) 26 – 55	(h) Over 55	<u>Total</u>	(a) Male	(b) Female	(c) Other	<u>Total</u>
(a) Employee Assistance Programs (b) DUI/DWI/MIP Education Programs																									
(c) Mens Alternative to Violence Programs (d) Prevention Assessment and Referral Services																									
(e) Student Assistance Programs (f) Womens Alternative to Violence Programs																									
(g) Other (specify)																									
SECTION D Where Services Occurred Please check all that apply.	l [	□ (b) Comn	native Schoo munity At La munity Cente	rge er		(e) (f) (g) (h)	Criminal Ju Faith Cent Health Ce Hospital	er	em		(i) (j) (k) (l)	Parks/Rei Public Ho Residentia		nt		(m) (n) (o) (p)	Street Ou Transition Treatment	al Housing Facility			(q) (r) (s)	Work Pla Youth Cl Other (sp	ubs/Center		

ADP 7235E - PROBLEM IDENTIFICATION AND REFERRAL STRATEGY (Revised 3/03) Departmental Use - SERVICE CODE 15

SECTION A Provider/Program	Information																						-
County Name:     Provider ID No.:					3	3. Provid	er Name:						5	. Telepho	ne No.: (	)							
2. Provider ID No.:						4. Contac	i Person:																
SECTION B Service Population Please check all boxes that apply. Asterist high-risk categories.  (a) Business and Industry (b) Children of Substance Ald (c) Civic Groups/Coalitions (d) College Students (e) Delinquent/Violent Youth (f) Economically Disadvanta	ks* denote	1 (h) Er 1 (i) Fii 1 (j) Ga 1 (k) Ga 1 (l) Ga 1 (m) Ha 1 (n) Hi 1 (o) Hi	ementary mployee ( re Profess angs eneral Po overnmer ealth Prof igh Schoo IV Infected	Groups/U sionals pulation at/Elected essionals I Student d Person	Inions d Officials s is s		(q) IV I (r) Law (s) Les (t) Loo (u) Mic (v) Nei (w) Old (x) Par	cal Munic ddle/Jr H ighborho ler Adults rents/Far	ers ement/M y/Bisexu cipal Age igh Scho od Asso s milies	ilitary al/Transg ncies ol Studer ciations	nts	(y) (aa) (bb) (cc) (dd) (ee) (ff)	People Wit Persons University Persons William Physical/En Pregnant Villiam Preschool Prevention Profession Religious C	sing Subst ith Physica motional A Vomen/Te Students /Treatmen al/Trade A Groups	ances* Al Disabili buse Vict ens* t Profess ssociation	ities* tims* ionals		ii) R jj) S kk) S il) T imm) V inn) V ioo) Y	Retailers Runaway/H School Drop Social Serv Feachers/A Yoluntary/F Women and Youth/Mino Other (specif	oouts* ice Prov dministra raternal d Childre rs	iders ators/Cou Commun n	ity Servic	
SECTION C Service Delivered		Determin "Number	ne the single Served" co	most appr lumn. The	ropriate sen se entries n	vice descrip nust be num	tion for each neric. Enter	n activity; fo A or E in t	or each sei he "Actual	vice deliver 'Estimated"	ed, complete column. For	e the entire row C2, C3 and C	<ol> <li>Enter the num</li> <li>enter in the de</li> </ol>	per of times to mographic b	he service reakdown;	was provide the "Totals"	ed in the "Fr should mat	equency" c ch the "Nur	column'; enter mber Served.'	the numb	er of persor	ns served in	the
				e/Ethnic								C3 Age		<u> </u>						C4 Ge	nder		
C1 Services Requiring Demographics Freque	ncy Number Served	A = Actual E = Estimated	(a) White, Not Hispanic	(b) Asian or Pacific Island.	(c) Hispanic/ Latino	(d) Native Am/ Alaska Native	(e) African American	(f) Multiracial/ Multiethnic	(g) Other	Specify "Other"	<u>Total</u>	n L	(b) 5 – 9 (c) 10 – 12	(d) 13 – 15	(e) 16 – 18	(f) 19 – 25	(g) 26 – 55	(h) Over 55	<u>Total</u>	(a) Male	(b) Female	(c) Other	<u>Total</u>
(a) Community/Volunteer Services for Training																							
(b) Friday Night Live (FNL) Club Live/FNL Kids																							
(c) Technical Assistance (TA)																							
(d) Training Services																							
(e) Other (specify)																							
- 1		•				1		1			1	<b>-</b>	l	•	1	1			•				
C5 Services Not Requiring De	mographics					Freq	uency			SECTI	ON D W	here Servi	ces Occurred										
(f) Assessing Community Need	s/Assets									Please	check all	that apply.		☐ (g)	Health	Center/C	linic		☐ (n)	Transi	tional Ho	using	
(g) Accessing Services/Funding										□ (a)	Alternat	ive Schools		☐ (h)	Hospit	al			□ (o)	Treatn	nent Facil	lity	
(h) Community Team Activities (	Multi-agency cod	ordination/o	collaborat	ion)						□ (b)	Commu	nity At large		☐ (i)	Parks/	Recreatio	n		□ (p)	Univer	sity/Colle	ege	
(i) Formal Community Teams										□ (c)	Commu	nity Center		□ (j)	Public	Housing			□ (q)	Work	Place		
(j) Systematic Planning Service	S									□ (d)	County/	Provider Off	ice	☐ (k)	Reside	ential Trea	atment		☐ (r)	Youth	Clubs/Ce	enter	
										□ (e)		Justice Sys	stem	□ (I)	School				☐ (s)	Other	(specify)		
ADP 7235F - COMMUNITY BASED PROCESS STRAT	FGY (Revised 3/03) De nar	tmental Use – SF	RVICE CODE	16						□ (f)	Faith Ce	enter		☐ (m)	Street	Outreach							

Reporting Period Dates: 7/1/03 through 6/30/04

<b>ENVIRONMENTAL</b>	STRATEGY -	ADP 7235G

SECTION A Provider/Program Info	rmation										_								
1. County Name:							me:				5.	Telephone I	No.: (	)					
2. Provider ID No.:					4. C	ontact Pers	son:												
SECTION B Target Environments B1 Places:	Please check	all boxes t	that apply.								B2 Even	ts.							
☐ (a) Alcohol Outlets ☐ (b) AOD Treatment/Recovery ☐ (c) Correctional Facilities ☐ (d) Faith Center	☐ (e) ☐ (f) ☐ (g) ☐ (h)	Health ( Hotel/M Neighbo Open S	orhoods		] (j) F ] (k) S	Public Facili Residences Schools Shopping/C		☐ (m) ☐ (n) ☐ (o)	Vehicles Workplace All other p (specify)		☐ (p) ☐ (r)	Block/Street Conventions County Fairs Graduation/0	and Trade and Other	Shows Mass Ever	ts [	] (u) S	lational/State I special Events Other (specify) _	for Affinity	Groups
B3 Problems and Environmental Ap	proaches	Used Ple	ease check all b	oxes that app	ly.														
,	<u>Approach</u>	<u>ies</u>		·		Deau						<u>Approach</u>	<u>ies</u>			_	I Doou I	· · · · · · · · · · · · · · · · · · ·	
<u>Problems</u>	Info/Ed	Presentation	n Mass Rally	Networking	Training	Docu- mentation Observat		Media	<u>Problen</u>	<u>1S</u>		Info/Ed	Presentation	Mass Rally	Networking	Training	Docu - mentation Observation	Official Action	Media
(a) Public Inebriation/Public Drinking										h Access									
(b) Violence					<u> </u>					ring, Litterin									
(c) Illicit Drug Dealing											or Drug Use								
(d) Driving Under the Influence											r Org. Problen	n   $\square$							
(e) Other Crime									(j) Other	(specify)									
B4 Service Populations Please check all boxes that apply. Asterisks* de			Elementary S				Homeowners A	ssociations		□ (y)		n Mental Heal		-		etailers	II V	L*	
high-risk categories.			Employee Gr	•	IS		IV Drug Users	1 /N A!!!!		□ (z)		ing Substanc				,	Iomeless Yout	Π	
			Fire Profession	onais		☐ (r) ☐ (s)	Law Enforceme		a a mada r	☐ (aa) ☐ (bb)		th Physical Di				chool Drop	pouts vice Providers		
☐ (a) Business and Industry ☐ (b) Children of Substance Abuser		-	Gangs General Popu	ulation		□ (s)	Lesbian/Gay/Bi Local Municipa		sgender	(cc)		notional Abus 'omen/Teens'					ice Providers idministrators/	Coupodoro	
☐ (c) Civic Groups/Coalitions			General Popt Government/		Sololo	□ (u)	Middle/Jr High		anto	☐ (dd)	Preschool S						raternal Comr		
					iciais	□ (u)				(dd)		Treatment Pr	afa a alamala				d Children	nunny serv	rice
			Health Profes				Neighborhood	ASSOCIATIONS		☐ (ee) ☐ (ff)									
☐ (e) Delinquent/Violent Youth* ☐ (f) Economically Disadvantaged*			High School S			□ (w)	Older Adults					I/Trade Assoc	ciations			outh/Mino			
☐ (f) Economically Disadvantaged*	L	J (U)	HIV Infected	reisons		⊔ (X)	Parents/Familie	35		☐ (gg)	Religious G	roups			(bb) O	ther (specif	гу)		
SECTION C Environmental Service	es Provide	d For Th	ne Reporting	Years															
		Г	No. of Projects Be	aun This	Continue T	de Buded	No. Policies Adopted This	$\neg$						No. of	Projects Begun T	his I N. A	antinology This Day's I	No. Policies	Adopted This
			Deded	No	. Continuing T	nis Perioa .	Dorlad	1							Deale d	No. Co	ontinuing This Period	D-	rlad

	No. of Projects Begun This Period	No. Continuing This Period	No. Policies Adopted This Period
(a) Zoning Ordinances for Alcohol Outlets, New			
(b) Zoning Ordinances, Abate Existing Outlets			
(c) Drinking in Public Ordinances Passed/Improved			
(d) One-Day Event Requirements Passed/Improved			
(e) School Policies Passed/Improved (K-12)			
(f) School Policies Passed/Improved (college)			
(g) Workplace Policies (not EAP, programs only)			
(h) State ABC Regulations Passed/Improved			
(i) Other Local Control Powers Passed/Improved			

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		No. of Projects Begun This Period	No. Continuing This Period	No. Policies Adopted This Period
(j)	Social Host Training/Management Programs			
(k)	Commercial Host Training/Management Programs			
(l)	Holiday Campaigns and Special Events			
(m)	Managing Hi-risk Advertising/Billboard Controls			
(n)	Facility Design to Prevent AOD Problems			
(0)	Improved Enforcement			
(p)	Neighborhood Mobilization			
(q)	Community Development			
(r)	Other (specify)			